Please type a	plus sign (+)	inside this	box —	→ [+

PTO/SB/121 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CORRESPONDENCE **ADDRESS INDICATION FORM**

Address to:

Assistant Commissioner for Patents Box CN Washington, DC 20231

Please recognize the following address as the correspondence address:							
X Cus	Customer Number 21831						
OR							
Request for Customer Number (PTO/SB/125) submitted herewith.							
in the following listed application(s) or patent(s) :							
Patent Nui (if appropr		Application Number	Patent Date (if appropria		U.S. Filing Date		
		09/403,912			10/28/1999		
Typed or Printed Name Signature Date Address of signer:	7	Martin G. Raskin March 19, 2003		Assignment 37 Cl	icant or Patentee gnee of record of the entire est. Statement under FR 3.73(b) is enclosed. in PTO/SB/96) rney or Agent of record 25,642		
				esentative/s	(Reg. No.)		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below *.							
*Total offorms are submitted.							

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CN, Washington, DC

PRACTITIONER(S)	Address to:		
OF RECORD	Assistant Commissioner for Patents		
INDICATION FORM	Box CN Washington, DC 20231		

Please recognize the following address for the practitioner(s) of record:						
X Customer Nu	1mber 21831		Place Customer Mumber Bar Code Asia Care			
OR	Type Customer Number	pere	PATENT AND TRADEHARK OFFICE			
Request for Customer Number (PTO/SB/125) submitted herewith.						
In the following listed application(s) or patent(s):						
Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date			
	09/403,912		10/28/1999			
Typed or Printed Name	Martin G. Raskin	(check one) cant or Palentee			
Signature	HZZ	Carl	gree ofrecord of the entire interest. licate under 37 CFR 3.73(b) is enclosed.			
Date Address of signer	March 19, 2003	Alax	neyor agent of record. 25,642 (Reg. No.)			

SEND FEES OR COMPLETED FORMS TO: Assistant Commissioner for Patents, Box CN, Washington, DC 20231.